



NATIONAL ELITE GYMNASTICS

7632 Hwy 71 West Austin, TX 78735 512-288-9722 office 512-288-4643 fax
www.neg-usa.com neg-usa@outlook.com

Student's Name: _____ D.O.B.: ____/____/____ Age: _____ M or F

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Student's Name: _____ D.O.B.: ____/____/____ Age: _____ M or F

Address: _____ City: _____ Zip: _____

Mother's Name: _____ Father's Name: _____

Home #: _____ Home #: _____

Work #: _____ Work #: _____

Cell #: _____ Cell #: _____

E-Mail: _____ **How did you hear about NEG?** _____

AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION

In the event that I cannot be reached to make arrangements for emergency medical attention, I authorize the facility director or person in charge to take my child to the nearest medical facility.

Signature of Parent or Legal Guardian: _____ Date: ____/____/____

Child's Physician: _____ Phone #: _____

Any known medical problems: _____

Emergency Name & Number: _____

RELEASE OF LIABILITY

All precautions will be taken to prevent accidents. However, should an accident occur, first aid will be administered and a parent and/or doctor will be notified. National Elite Gymnastics and staff cannot be held liable for injuries that occur on the premises or otherwise in the care of N.E.G. personnel.

I/We _____ assume all responsibility and waive any claim for compensation for injury incurred by my/our child while at National Elite Gymnastics and hereby agree to indemnify or hold harmless N.E.G., it's owners, and staff against any and all claims, which may arise from an injury to my/our child/children while participating in the program.

SIGNATURE OF PARENT OR LEGAL GUARDIAN: _____ DATE: ____/____/____

COACH: _____ CLASS: _____ DAY: _____ TIME: _____

REGISTRATION DATE: ____/____/____ CHECK #: _____ CASH #: _____

REGISTRATION FEE: _____ MONTHLY FEE: _____ TOTAL: _____ CP PB PAY RB EM
 (due every Aug.)

WELCOME TO NATIONAL ELITE GYMNASTICS (NEG)! WE HAVE LISTED A FEW RULES AND GUIDELINES TO BETTER ACQUAINT YOU WITH OUR PROGRAM.

1. Classes are scheduled for fifty five (55) minutes. They begin on the hour and finish five minutes before the hour. Exception: Preschool classes are fifty (50) minutes long.
2. Payments are due by the eighth (8th) of the month. You may mail your payment in if you feel you will not make it to the gym on time. There is a \$10.00 per child discount if we receive your payment before or on the eighth day. If payment has not been received by the fifteenth (15th) day of the month your child may be asked to sit out of the class.
3. No refunds will be given for missed classes! **We do not prorate months that have closed days due to holidays.**
4. One makeup class per child per month is allowed. Generally we try to hold makeup's on the first Saturday of the following month. You must, however, reserve your spot.
5. If your child will be discontinuing lessons, you must let us know in advance or you will be responsible for the next month tuition. **Please give us one month written notice with your final monthly tuition.**
6. Regular office hours are Monday—Friday 9:00 a.m.—7:00 p.m. and Saturday 10:00 a.m.—1:00 p.m. Summer hours may be different.
7. Please try to drop your children off as close to class time as possible, and pick them up as close to finishing time as possible. Children who come early, and leave late create a crowding problem, which in turn, presents a safety problem.
8. Children arriving for a preschool class more than ten (10) minutes after the hour and regular classes fifteen (15) minutes after the hour WILL NOT BE ALLOWED IN CLASS!!!
9. General rules for all classes:
 - A) No gum, food, or drinks allowed in gym area.
 - B) No jewelry during class time.
 - C) Hair must be pulled back.
 - D) Remove shoes before getting on the mats.
 - E) Students should wear leotards if possible.
 - F) Shirts should be tucked in.
 - G) Shorts should be free of buckles, snaps, and zippers.
 - H) Students must have a coach present in order to work on the equipment. (This is especially true before and after class.) FAILURE TO DO SO MAY RESULT IN INJURY!
 - I) If you are observing class, please stay in the viewing area provided. Children not in classes should remain in the seating area.
 - J) Parents are not allowed in the GYM unless asked by your child's coach.

PLEASE GO OVER THESE RULES WITH YOU CHILDREN TO ASSURE THEY UNDERSTAND AND WHAT IS EXPECTED OF THEM!

IF YOU LIKE WHAT WE ARE DOING, TELL OTHERS!
IF YOU DON'T LIKE IT, PLEASE TELL US!

I HAVE READ THE RULES AND I AM AWARE OF ALL TERMS APPLICABLE.

PARENT/GUARDIAN SIGNATURE: _____ DATE: ____/____/____

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Class day & time: _____

Monthly Tuition paid on or before the 8th: _____

Parent Copy